



## City of Northampton

## Application for Business Owner's Permit - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)

☐

New Application

☒

Renewal

Today's Date:

4/29/22

(Check one)

☒

Taxi Service

☐

Livery Service

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

 241 Haydeville Rd. Leeds MA 01053  
 Number Street City/Town State Zip Code

Corporation Name:

DBA Name:

Cosmic Cab Company

Business Address

 160 Main St. #8 Northampton MA 01060  
 Number Street City/Town State Zip Code

Mailing Address

 160 Main St. #8 Northampton MA 01060  
 Number Street City/Town State Zip Code

Telephone Number for the business owner:

413-230-6119

Telephone Number for the business:

413-230-6119

Description of Motor Vehicles to be operated under permit:

 2007 Chevy Suburban (Brown) 2012 Chrysler Town + Country (gray)  
 2013 Chrysler Town + Country (Blue) 2014 Chrysler Town + Country (gray) 2010 Dodge Grand Caravan (gray)  
 2010 Dodge Grand Caravan (gray) 2009 Dodge Grand Caravan (Blue) 2010 Dodge Grand Caravan (white)

Hours of Operation:

6am - 12 midnight 7 Days week

Sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me.

City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is \_\_\_\_\_

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council

# PARKING SPACE RENTAL AGREEMENT

- I. **The Parties.** This agreement dated on the 22 day of November, 2021 by and between Karol & Marie Drozdal with a mailing address of 120 Damon Rd. in the City of Northampton, State of Massachusetts (Hereinafter known as the 'Lessor') and Jeffrey Miller with a mailing address of 160 Main St. in the City of Northampton, State of Massachusetts (Hereinafter known as the 'Lessee') for a parking

space located at:

120 Damon Rd., Northampton, MA 01060

- II. **Term.** The term of this agreement shall begin on the 1st day of December, 2021 and continue:

(Check One)

☐ - until the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

☒ - on a month to month basis. Termination may be made by either party with at least 30 days' written notice. All notices shall be sent to the parties' information in Section I.

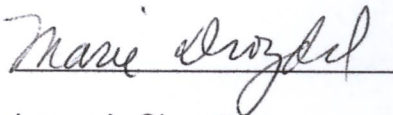
- III. **Rent.** The rental payment shall be due on the 1st of every month in the amount of Five Hundred dollars (\$500.00). Payment shall be delivered to the Lessor by the Lessee in the following manner:  
Mail or delivery (check made payable to Marie Drozdal)

- IV. **Subletting.** The Lessee is not allowed to sublease (sublet) the space without the direct written consent from the Lessor.



- V. **Current Registration & Insurance.** Lessee may only use the space for vehicles that are up-to-date with all State and local registration. In addition, all vehicles must maintain current with insurance that is legal under the State of registration.
- VI. **Maintenance.** Lessee is required to keep the vehicle in good repair and free of hazardous leaks of oils or liquids. No repairs of any type are allowed on the parking space and, if needed, must be towed to a location that allows such activities.
- VII. **Use of Space & Damage.** The use of the space may only be for the parking of a vehicle that is owned/leased by the owner. No storage of personal property may be allowed in the space. Lessor is not liable for any damage done to the vehicle or personal property taken from it. All liability to the vehicle and personal property will be responsibility of the Lessee.
- VIII. **Governing Law.** This agreement shall be governed under the laws in the State of Massachusetts.

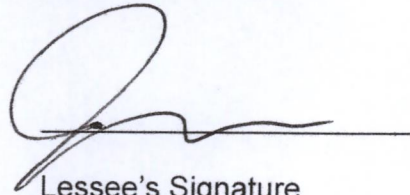
This agreement was signed on the 19<sup>th</sup> day of November, 2021.



Lessor's Signature

Karol & Marie Drozdal

Lessor's Printed Name



Lessee's Signature

Jeffrey Miller

Lessee's Printed Name



April 29, 2022

Child Safety Seat Plan 2022/23.

As per the order of the City of Northampton 319-19-4

Cosmic Cab will provide a front or rear facing Child Safety Seat or Booster Seat upon the request of any customer. The customer will need to schedule at least 1 hour in advance to ensure the availability of the safety restraint required.

Best Regards,

Jeffrey D. Miller

Owner

Cosmic Cab Company 160 Main St. #8, Northampton, MA 01060

(413) 230-6119



City of Northampton

STATEMENT OF ALL TAXES FILED AND PAID

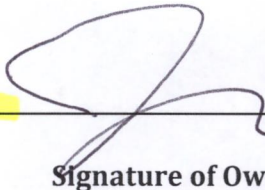
Name of Business: Cosmic Cab

Location of Business: 23 Hooker Avenue

The licenses to operate as a second hand dealer will not be issued unless this certification clause is signed by the applicant listed on the license.

I, ☒ Jeffrey Miller (print name of owner or authorized agent of the business) certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes as required under law.

☒

  
Signature of Owner or Agent

☒



or ☒

Social Security Number

Federal Identification Number

Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licenses who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Massachusetts General Law, chapter 62C, section 49A.

## City of Northampton

### AFFADAVIT OF WAGE COMPLIANCE

Name of Business: Cosmic Cab

Location of Business: 23 Hooker Avenue

The Northampton City Council, in determining whether to issue, re-issue, modify, suspend or revoke a license. under G.L. c. 140, shall require that a potential or current licensee certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. The City Council may require a wage bond or insurance be posted by any potential licensee who does not certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. Licensees that are subject to a state or federal debarment for violation of the above laws, either voluntarily or involuntarily, or that have been prohibited from contracting with the Commonwealth or any of its agencies or subdivisions shall be prohibited from holding, or continuing to hold, licenses issued under G.L. c. 140, for the entire period of debarment or other stated time period.

Applicants must check box 1 or box 2 as applicable and must sign this Form, certifying compliance with the requirements set out in this Form. This Form must be included with the application.

AFFADAVIT: (V) (Choose 1 below)



This License applicant is not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act within the last three years.



This License applicant is subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act within the last three years. This applicant will provide a wage bond or wage insurance for the period of the license.

(V)

Jeffrey Miller

(Typed or printed name of applicant)

(V)

[Signature]  
(Signature)



**City of Northampton**  
**Treasurer/Collector's Office**  
**Permit Denial Form**

Revised 11-30-2018

REQUESTED BY: **Pamela L. Powers, City Clerk**

Name of Person, Corporation or Business: **Cosmic Cab**

Location of Property, Service or Address: **23 Hooker Avenue, Northampton, MA 01060**

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**All permits denied for outstanding amounts must receive confirmation of good standing from the Treasurer/Collector's Office PRIOR to issuance of the permit.**

*For Tax Collector's/Treasurer's Office Use Only*

Please list below any tax, assessed to your office that is unpaid for twelve (12) months or more after its due date, unless there is a pending abatement or appeal before the Appellate Tax Board, for the person, corporation, or business entity noted above.

No confirmable outstanding obligation 12+ months beyond due date

Signed: \_\_\_\_\_

*Wane L. Steele*

Dated: \_\_\_\_\_

5-2-2022

Adopted 5-21 1992 [Ch14 S.14-21 of the 1977 Code]  
Denial/Revocation of License

City of Northampton



Office / Agent: 46-0028  
Tax ID No.:  
Policy Number: 1020093350 03

DECLARATIONS - MASSACHUSETTS  
BUSINESS AUTO COVERAGE FORM  
MM 00 97 09 98



ITEM ONE- NAMED INSURED AND ADDRESS  
JEFF MILLER  
DBA COSMIC CAB  
160 MAIN ST STE 8  
NORTHAMPTON, MA 01060

Producer Name and Address 46-0028  
LIGHTHOUSE INS AGCY LTD  
540 GALLIVAN BLVD  
SUITE 211  
DORCHESTER, MA 02124

POLICY PERIOD: Policy Covers FROM 01/18/2022 TO 01/18/2023 12:01 A.M. Standard Time at the Named  
Reason for Declaration: VC ENDORSEMENT Insured's Address stated above  
Named Insured's Business: INDIVIDUAL DIRECT BILL  
Effective Date: 03/25/2022

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL TERMS OF THIS  
POLICY, WE AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

ITEM TWO - SCHEDULE OF COVERAGES AND COVERED AUTOS

This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "Autos" shown as covered "Autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form next to the name of the coverage.

LIABILITY INSURANCE

COVERAGES	COVERED AUTOS (Entry of one or more of the symbols from the COVERED AUTOS Section of the Business Auto Coverage Form show which autos are covered autos.)	LIMIT The most we will pay for any one accident or loss	PREMIUM
Compulsory Bodily Injury	7	20,000 Each Person 40,000 Each Accident	13,230
Personal Injury Protection	7	8,000 Each Person	5,202
Optional Bodily Injury	7	100,000 Each Person 300,000 Each Accident	15,858
Property Damage (COMPULSORY LIMIT \$5,000)	7	50,000 Each Accident	12,654
Auto Medical Payments Insurance		Each Person	
Uninsured Motorists (COMPULSORY LIMITS \$20,000/\$40,000)	7	SEE SCHEDULE SEE SCHEDULE Each Person Each Accident	396
Underinsured Motorists	7	SEE SCHEDULE SEE SCHEDULE Each Person Each Accident	INCL

PHYSICAL DAMAGE INSURANCE

Actual Cash Value or cost of repair, whichever is less, minus the deductible for each Covered Auto.

Comprehensive Coverage		Deductible	
Specified Perils Coverage		Deductible	
Collision Coverage		Deductible	
Limited Collision Coverage		Deductible	
Loss of Use-Rental Reimbursement			
Towing and Labor		For each disablement of a private passenger auto.	

Forms and Endorsements attached to this Coverage Form:

26 AP 1056 (01/10) CA 00 01 (10/01) IL 00 21 (04/98)  
26 AP 1057 (01/10) CA 23 86 (01/06) MM 99 11 (10/11)  
26 AP 1092 (01/10) CA 24 02 (12/93) MM 99 18 (09/98)  
26 AP 1102 (04/11) CA 99 17 (07/97) MM 99 23 (09/98)  
26 AP 1109 (07/16) IL 00 17 (11/85) MM 99 54 (09/98)

PREMIUM FOR ENDORSEMENTS	
ADDITIONAL OR RETURN PREMIUM	4,306
*ESTIMATED TOTAL PREMIUM	47,340

\* This policy may be subject to final audit.



Office / Agent: 46-0028

Tax I.D. No.:

Policy Number: 1020093350 03

ITEM THREE- SCHEDULE OF COVERED AUTOS YOU OWN

DECLARATIONS - MASSACHUSETTS  
BUSINESS AUTO COVERAGE FORM

SCHEDULE - MM 00 97 09 98



## VEHICLE INFORMATION

DESCRIPTION				
Auto No.	Year, Make, Model, Body Vehicle Identification No. (VIN)	Original Cost New	Size GVW, GCW or Seating Capacity	Territory, City & State where the covered auto will be garaged
002	2007 CHEVROLET SUBURBAN K1500 WAGON 4 3GNFK16367G155614	39,665		LEEDS MA
003	2009 DODGE GRAND CARAVAN SE SPORT VAN 2D8HN44E59R576432	23,530		LEEDS MA
004	2010 DODGE GRAND CARAVAN SE SPORT VAN 2D4RN4DE8AR207297	23,175		LEEDS MA
005	2008 DODGE GRAND CARAVAN SE EXTENDED 2D8HN44HX8R772469	21,740		LEEDS MA

## CLASSIFICATION

Auto No.	Business use - Service Retail, Commercial	Symbol	Age Group	Class	Radius of Operation	Mobile Equip	Inspect Code	Loss of Use Amt/Days
002		08	9	41890	LOCAL			/
003		07	9	41890	LOCAL			/
004		07	9	41890	LOCAL			/
005		07	9	41890	LOCAL			/

## LIABILITY LIMITS (\* Limit(s) in Thousands)

Compulsory Bodily Injury (\$20,000/\$40,000) each pers./each acc.		Personal Injury Protection \$8,000 Ea Person		Optional Bodily Injury		Property Damage (Compulsory Limit \$5,000)		Auto Medical Payments		Uninsured Motorists Compulsory Limits (\$20,000/\$40,000)		Underinsured Motorists	
Auto No.	Premium	Premium	*Limit	Premium	*Limit	Ded.	Premium	Limit	Premium	*Limit	Premium	*Limit	Premium
002	1,470	578	100	1,762	50		1406			20	44	20	INCL
			300							40		40	
003	1,470	578	100	1,762	50		1,406			20	44	20	INCL
			300							40		40	
004	1,470	578	100	1,762	50		1,406			20	44	20	INCL
			300							40		40	
005	1,470	578	100	1,762	50		1,406			20	44	20	INCL
			300							40		40	

## PHYSICAL DAMAGE

Auto No.	@ Value Type and Limit	** Specified Perils			Comprehensive		Collision		Limited Collision	
		Cov.	Ded.	Premium	Ded.	Premium	Ded.	Premium	Ded.	Premium
002	ACV									
003	ACV									
004	ACV									
005	ACV									

Auto No.	Passive Rest.	ATD	*** Waiver of Ded.	Loss of Use	Towing and Labor	** F - Fire Coverage, T - Theft Coverage, F&T - Fire and Theft, CAC - Combined Additional Coverage. *** YES-Designates Waiver of Deductible. ## Designates Policy Level Additional Insured - Lessor applies. @ Designates whether Actual Cash Value, Stated Amount or Agreed Value and, except for ACV, the limit of Liability.

Auto No.	Except for towing all physical damage loss is payable to you and the loss payee named below as interests may appear at the time of loss.

Includes copyrighted material of Insurance Services Office with its permission.

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Office / Agent: 46-0028

Tax I.D. No.:

Policy Number: 1020093350 03

## DECLARATIONS - MASSACHUSETTS

## BUSINESS AUTO COVERAGE FORM

SCHEDULE - MM 00 97 09 98



ARBELLA

PROTECTION INSURANCE COMPANY

## ITEM THREE- SCHEDULE OF COVERED AUTOS YOU OWN

## VEHICLE INFORMATION

DESCRIPTION				
Auto No.	Year, Make, Model, Body Vehicle Identification No. (VIN)	Original Cost New	Size GVW, GCW or Seating Capacity	Territory, City & State where the covered auto will be garaged
006	2010 DODGE GRAND CARAVAN HERO SPORT 2D4RN3D19AR384867	24,855		NORTHAMPTON MA
007	2012 CHRYSLER TOWN & COUNTRY TOURING 2C4RC1BG9CR189806	29,995		NORTHAMPTON MA
009	2010 DODGE GRAND CARAVAN HERO SPORT 2D4RN3D12AR489881	24,855		LEEDS MA
010	2014 CHRYSLER TOWN & COUNTRY TOURING 2C4RC1BG2ER127036	30,765		LEEDS MA

## CLASSIFICATION

Auto No.	Business use - Service Retail, Commercial	Symbol	Age Group	Class	Radius of Operation	Mobile Equip	Inspect Code	Loss of Use Amt/Days
006		07	9	41890	LOCAL			/
007		08	9	41890	LOCAL			/
009		07	9	41890	LOCAL			/
010		08	9	41890	LOCAL			/

## LIABILITY LIMITS (\* Limit(s) in Thousands)

Compulsory Bodily Injury (\$20,000/\$40,000) each pers./each acc.		Personal Injury Protection \$8,000 Ea Person	Optional Bodily Injury		Property Damage (Compulsory Limit \$5,000)			Auto Medical Payments		Uninsured Motorists Compulsory Limits (\$20,000/\$40,000)		Underinsured Motorists	
Auto No.	Premium	Premium	*Limit	Premium	*Limit	Ded.	Premium	Limit	Premium	*Limit	Premium	*Limit	Premium
006	1,470	578	100	1,762	50		1406			20	44	20	INCL
			300							40		40	
007	1,470	578	100	1,762	50		1,406			20	44	20	INCL
			300							40		40	
009	1,470	578	100	1,762	50		1,406			20	44	20	INCL
			300							40		40	
010	1,470	578	100	1,762	50		1,406			20	44	20	INCL
			300							40		40	

## PHYSICAL DAMAGE

Auto No.	@ Value Type and Limit	** Specified Perils			Comprehensive		Collision		Limited Collision	
		Cov.	Ded.	Premium	Ded.	Premium	Ded.	Premium	Ded.	Premium
006	ACV									
007	ACV									
009	ACV									
010	ACV									

Auto No.	Passive Rest.	ATD	*** Waiver of Ded.	Loss of Use	Towing and Labor	** F - Fire Coverage, T - Theft Coverage, F&T - Fire and Theft, CAC - Combined Additional Coverage. *** YES-Designates Waiver of Deductible. ## Designates Policy Level Additional Insured - Lessor applies. @ Designates whether Actual Cash Value, Stated Amount or Agreed Value and, except for ACV, the limit of Liability.

Auto No.	Except for towing all physical damage loss is payable to you and the loss payee named below as interests may appear at the time of loss.

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04/02/2022



Office / Agent: 46-0028

Fax I.D. No.:

Policy Number: 1020093350 03

## DECLARATIONS - MASSACHUSETTS

## BUSINESS AUTO COVERAGE FORM

SCHEDULE - MM 00 97 09 98

FORM THREE- SCHEDULE OF COVERED AUTOS YOU OWN



ARBELLA

PROTECTION INSURANCE COMPANY

## VEHICLE INFORMATION

DESCRIPTION				
Auto No.	Year, Make, Model, Body Vehicle Identification No. (VIN)	Original Cost New	Size GVW, GCW or Seating Capacity	Territory, City & State where the covered auto will be garaged
011	2013 CHRYSLER TOWN & COUNTRY TOURING 2C4RC1BG8DR632044	29,995		LEEDS MA

## CLASSIFICATION

Auto No.	Business use - Service Retail, Commercial	Symbol	Age Group	Class	Radius of Operation	Mobile Equip	Inspect Code	Loss of Use Amt/Days
011		08	9	41890	LOCAL			/
								/
								/
								/

## LIABILITY LIMITS (\* Limit(s) in Thousands)

Compulsory Bodily Injury (\$20,000/\$40,000) each pers./each acc.		Personal Injury Protection \$8,000 Ea Person		Optional Bodily Injury		Property Damage (Compulsory Limit \$5,000)		Auto Medical Payments		Uninsured Motorists Compulsory Limits (\$20,000/\$40,000)		Underinsured Motorists	
Auto No.	Premium	Premium	*Limit	Premium	*Limit	Ded.	Premium	Limit	Premium	*Limit	Premium	*Limit	Premium
011	1,470	578	100 300	1,762	50		1406			20 40	44	20 40	INCL

## PHYSICAL DAMAGE

Auto No.	@ Value Type and Limit	** Specified Perils			Comprehensive		Collision		Limited Collision	
		Cov.	Ded.	Premium	Ded.	Premium	Ded.	Premium	Ded.	Premium
011	ACV									

Auto No.	Passive Rest.	ATD	*** Waiver of Ded.	Loss of Use	Towing and Labor	** F - Fire Coverage, T - Theft Coverage, F&T - Fire and Theft, CAC - Combined Additional Coverage. *** YES-Designates Waiver of Deductible. ## Designates Policy Level Additional Insured - Lessor applies. @ Designates whether Actual Cash Value, Stated Amount or Agreed Value and, except for ACV, the limit of Liability.

Auto No.	Except for towing all physical damage loss is payable to you and the loss payee named below as interests may appear at the time of loss.

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INSURED COPY



## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241 Haydenville Rd.

Leeds

MA

01053

Number

Street

City/Town

State

Zip Code

Business Address

160 Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Mailing Address

160 Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Telephone Number

413-230-6119

## Vehicle Information

Make

Dodge

Registration Number

TA 603C

Model

Grand Caravan

Vehicle Id Number

#08

Year

2009

Seating Capacity

6

(exclusive of operator)

Color

Blue

Number of Seat belts

7

**Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo of vehicle**

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this

29th

day of

April

20

22

before me.

*Pamela L. Poup*  
City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council



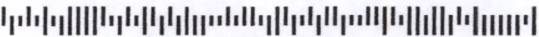


REGISTRY OF MOTOR VEHICLES

**CERTIFICATE OF REGISTRATION**

M.G.L. Chapter 90 section 24B makes it a crime to alter this Certificate

**MASSACHUSETTS DEPARTMENT OF TRANSPORTATION**

Plate Type TAN	Registration Type TAXI NORMAL	Plate Number 603C	Effective Date 01-Dec-2021	Title Number CB535233	Expires On →	Month 11	Year 22
Model Year 2009	Make DODG	Model GRANDC	Model Number	Body Style VAN	Color(s) BLUE	Vehicle Identification Number 2D8HN44E59R576432	
Residential Address (If Different than Mailing)					Total Registered Weight for Commercial Vehicle or Trailer		
Garage Address 241 HAYDENVILLE RD LEEDS MA 010539768					US DOT Number for Commercial Vehicle		
Name(s) of Owner(s) and Mailing Address  006903 *****AUTO**5-DIGIT 01060 JEFFREY D MILLER 160 MAIN ST STE 8 NORTHAMPTON MA 01060-3187					Insurance Company ARBELLA PROTECTION INSURANCE COMPANY		
					Maximum Seating Capacity for Vehicles for Hire 7		
					Registrar of Motor Vehicles <i>Colleen J. Ogilvie</i>		
Lessee/In Custody Of							
Special Message				Change of Address <input type="checkbox"/> Residential <input type="checkbox"/> Mailing <input type="checkbox"/> Garage			

**Important Information for Vehicle Owners**

- **Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. **The records of the RMV constitute the official status of the vehicle registration.**
- **Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- **No Insurance Card Required:** Massachusetts law does not require an insurance card. M.G.L. Chapter 90, section 34, and Chapter 175, Section 113A, requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. The insurer is required by law to electronically notify the Registry of Motor Vehicles if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.
- **Transferring Your Plates:** Massachusetts General Law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. See the Transferring a Registration Section on the RMV's website at [www.mass.gov/rmv](http://www.mass.gov/rmv) for more information.
- **Cancel the registration plates if:**
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

**Skip the Line, Go Online! Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) for list of available transactions.**

221874493





# Vehicle Inspection Report

Cleaner Air • Safer Roads

## Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:		Vehicle Information		Station Information	
Safety Result	PASS	VIN	2D8HN44E59R576432	ERNIE'S GARAGE INC	
Emissions Result	PASS	License Plate	603C	72 KING STREET	
Start Test Date/Time	9/22/2021 11:28 AM	Plate Type/State	TAN / MA	NORTHAMPTON	MA
End Test Date/Time	9/22/2021 11:34 AM	Vehicle Type	PASSENGER	(413) 584-0716	
Test Type	Regular	Year / Make	2009 Dodge		
Sticker Number	224217411	Model	Grand Caravan	Station Number	PB100149
Inspection Type	Initial	Fuel Type	GASOLINE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	6 / 3.3L	Inspector Number	*****5128
		GVWR	7000		
		Odometer	215388		
				Inspection Fee	\$35.00

## Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	N/A	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

## Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	11045
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	69
RPM Result	PASS	Evaporative System	READY	Pin 16 Voltage	14.2
Key-On Bulb Check	N/A	Secondary Air System	UNSUPPORTED	<b>OBD Diagnostic Trouble Codes</b>	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED		
Scan Tool Check	N/A	Oxygen Sensor	READY	<b>OBD Permanent Fault Codes</b>	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS			7F 0A 80	

Scan to visit website



VIR Number















## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241 Haysdenville Rd

Number

Street

Leeds

City/Town

MA

State

01053

Zip Code

Business Address

160 Main St. #8

Number

Street

Northampton

City/Town

MA

State

01060

Zip Code

Mailing Address

160 Main St. #8

Number

Street

Northampton

City/Town

MA

State

01060

Zip Code

Telephone Number

413-230-6119

## Vehicle Information

Make

Chevrolet

Registration Number

TA 26977

Model

Suburban K1500

Vehicle Id Number

#03

Year

2007

Seating Capacity

6

(exclusive of operator)

Color

Brown

Number of Seat belts

7

Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this

29th

day of

April

20

22

before me.

City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council

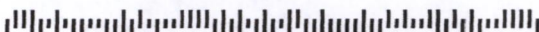
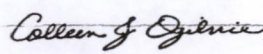




# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 section 24B makes it a crime to alter this Certificate

MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

Plate Type TAN	Registration Type TAXI NORMAL	Plate Number 26977	Effective Date 01-Dec-2021	Title Number BV081520	Expires On →	Month 11	Year 22
Model Year 2007	Make CHEV	Model K15BLA	Model Number	Body Style SUV	Color(s) BROWN	Vehicle Identification Number 3GNFK16367G155614	
Residential Address (If Different than Mailing)					Total Registered Weight for Commercial Vehicle or Trailer		
Garage Address 241 HAYDENVILLE RD LEEDS MA 010539768					US DOT Number for Commercial Vehicle		
Name(s) of Owner(s) and Mailing Address  006921 *****AUTO**5-DIGIT 01060 JEFFREY D MILLER 160 MAIN ST STE 8 NORTHAMPTON MA 01060-3187					Insurance Company ARBELLA PROTECTION INSURANCE COMPANY		
					Maximum Seating Capacity for Vehicles for Hire 7		
					Registrar of Motor Vehicles 		
					Lessee/In Custody Of		
Special Message			Change of Address <input type="checkbox"/> Residential <input type="checkbox"/> Mailing <input type="checkbox"/> Garage				

## Important Information for Vehicle Owners

- **Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. **The records of the RMV constitute the official status of the vehicle registration.**
- **Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit Mass.Gov/RMV to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- **No Insurance Card Required:** Massachusetts law does not require an insurance card. M.G.L. Chapter 90, section 34, and Chapter 175, Section 113A, requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. The insurer is required by law to electronically notify the Registry of Motor Vehicles if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.
- **Transferring Your Plates:** Massachusetts General Law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. See the Transferring a Registration Section on the RMV's website at [www.mass.gov/rmv](http://www.mass.gov/rmv) for more information.
- **Cancel the registration plates if:**
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

Massachusetts

22

Skip the Line, Go Online! Visit Mass.Gov/RMV for list of available transactions.

221865261





# Vehicle Inspection Report

## Please Review This Important Information

Your vehicle has **PASSED** its **SAFETY TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday through Friday and from 7 a.m. to Noon on Saturday.

Overall Result:	PASS	Vehicle Information		Station Information	
Safety Result	PASS	VIN	3GNFK16367G155614	ERNIE'S GARAGE INC	
Emissions Result	N/A	License Plate	26977	72 KING STREET	
Start Test Date/Time	4/22/2022 2:06 PM	Plate Type/State	TAN / MA	NORTHAMPTON	MA
End Test Date/Time	4/22/2022 2:14 PM	Vehicle Type	PASSENGER	(413) 584-0716	
Test Type	Regular	Year / Make	2007 Chevrolet		
Sticker Number	231418866	Model	Suburban	Station Number	PB100149
Inspection Type	Initial	Fuel Type	FLEXIBLE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	8 / 5.3L	Inspector Number	*****1632
		GVWR	8000		
		Odometer	0		

Inspection Fee	\$35.00
----------------	---------

### Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	N/A	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

### Inspection Comments

None

VIR Number



Scan to visit website:















## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241

Haydenville Rd.

Leeds

MA

01053

Number

Street

City/Town

State

Zip Code

Business Address

160

Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Mailing Address

160

Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Telephone Number

413-230-6119

## Vehicle Information

Make

Chrysler

Registration Number

TA 26981

Model

Town + Country

Vehicle Id Number

#05

Year

2012

Seating Capacity

6 ppl

(exclusive of operator)

Color

Gray

Number of Seat belts

7

Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this

29th

day of

April

20

20

before me.

Pamela P. Powers

City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council





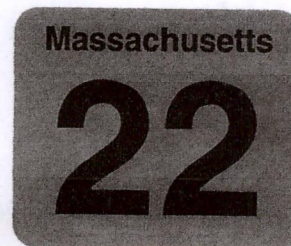
# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 section 24B makes it a crime to alter this Certificate  
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

Plate Type TAN	Registration Type TAXI NORMAL	Plate Number 26981	Effective Date 01-Dec-2021	Title Number CD441881	Expires On →	Month 11	Year 22
Model Year 2012	Make CHRY	Model TOWN &	Model Number	Body Style VAN	Color(s) GRAY	Vehicle Identification Number 2C4RC1BG9CR189806	
Residential Address (If Different than Mailing)					Total Registered Weight for Commercial Vehicle or Trailer		
Garage Address 160 MAIN ST STE 8 NORTHAMPTON MA 010603187					US DOT Number for Commercial Vehicle		
Name(s) of Owner(s) and Mailing Address  006898 *****AUTO**5-DIGIT 01060 JEFFREY D MILLER 160 MAIN ST STE 8 NORTHAMPTON MA 01060-3187					Insurance Company ARBELLA PROTECTION INSURANCE COMPANY		
					Maximum Seating Capacity for Vehicles for Hire 8		
					Registrar of Motor Vehicles <i>Colleen J. Ogilvie</i>		
Lessee/In Custody Of							
Special Message				Change of Address <input type="checkbox"/> Residential <input type="checkbox"/> Mailing <input type="checkbox"/> Garage			

## Important Information for Vehicle Owners

- **Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. **The records of the RMV constitute the official status of the vehicle registration.**
- **Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit Mass.Gov/RMV to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- **No Insurance Card Required:** Massachusetts law does not require an insurance card. M.G.L. Chapter 90, section 34, and Chapter 175, Section 113A, requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. The insurer is required by law to electronically notify the Registry of Motor Vehicles if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.
- **Transferring Your Plates:** Massachusetts General Law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. See the Transferring a Registration Section on the RMV's website at [www.mass.gov/rmv](http://www.mass.gov/rmv) for more information.
- **Cancel the registration plates if:**
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.



Skip the Line, Go Online! Visit Mass.Gov/RMV for list of available transactions.

221874488





# Vehicle Inspection Report

Cleaner Air • Safer Roads

## Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result: <b>PASS</b>		Vehicle Information		Station Information	
Safety Result	PASS	VIN	2C4RC1BG9CR189806	ERNIE'S GARAGE INC	
Emissions Result	PASS	License Plate	26981	72 KING STREET	
Start Test Date/Time	9/7/2021 10:53 AM	Plate Type/State	TAN / MA	NORTHAMPTON	MA
End Test Date/Time	9/7/2021 11:03 AM	Vehicle Type	PASSENGER	(413) 584-0716	
Test Type	Regular	Year / Make	2012 Chrysler		
Sticker Number	224217070	Model	Town and Country	Station Number	PB100149
Inspection Type	Initial	Fuel Type	FLEXIBLE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	6 / 3.6L	Inspector Number	*****5128
		GVWR	7000		
		Odometer	150839		

<b>Inspection Fee</b>	<b>\$35.00</b>
-----------------------	----------------

## Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

## Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	4114
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	240
RPM Result	PASS	Evaporative System	READY	Pin 16 Voltage	14.2
Key-On Bulb Check	N/A	Secondary Air System	UNSUPPORTED	<b>OBD Diagnostic Trouble Codes</b>	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED		
Scan Tool Check	N/A	Oxygen Sensor	READY	<b>OBD Permanent Fault Codes</b>	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS				

VIR Number



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**SPACES**  
Storage Solutions For Rent

**COSMIC CAB**  
160 MAIN ST.  
NORTHAMPTON, MA

**05**

**05**









# City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241 Haydensville Rd.

Leeds

MA

01053

Number

Street

City/Town

State

Zip Code

Business Address

160 Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Mailing Address

160 Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Telephone Number

413-230-6119

### Vehicle Information

Make

Dodge

Registration Number

TA 629 D

Model

Grand Caravan

Vehicle Id Number

#04

Year

2010

Seating Capacity  
(exclusive of operator)

6

Color

Gray

Number of Seat belts

7

Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this

29th

day of

April

, 20

22

, before me.

Pamela Powers

City Clerk

### FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council





# Vehicle Inspection Report

## Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result:	PASS	Vehicle Information		Station Information	
Safety Result	PASS	VIN	2D4RN3D12AR489881	ERNIE'S GARAGE INC	
Emissions Result	PASS	License Plate	629D	72 KING STREET	
Start Test Date/Time	3/21/2022 9:47 AM	Plate Type/State	TAN / MA	NORTHAMPTON	MA
End Test Date/Time	3/21/2022 9:55 AM	Vehicle Type	PASSENGER	(413) 584-0716	
Test Type	Regular	Year / Make	2010 Dodge		
Sticker Number	231418263	Model	Grand Caravan	Station Number	PB100149
Inspection Type	Initial	Fuel Type	GASOLINE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	6 / 3.8L	Inspector Number	*****5128
		GVWR	7000		
		Odometer	128869		

<b>Inspection Fee</b>	<b>\$35.00</b>
-----------------------	----------------

## Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	N/A	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

## Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	2172
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	18
RPM Result	PASS	Evaporative System	READY	Pin 16 Voltage	13.6
Key-On BulbCheck	N/A	Secondary Air System	UNSUPPORTED	OBD Diagnostic Trouble Codes	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED		
Scan Tool Check	N/A	Oxygen Sensor	READY	OBD Permanent Fault Codes	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS				

Scan to visit website

VIR Number







## CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate  
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

EXTERNAL CODE <b>TAN</b>		REGISTRATION TYPE <b>Taxi Normal</b>		PLATE NUMBER <b>629D</b>		EFFECTIVE DATE <b>08-Mar-2022</b>		TITLE NUMBER <b>EXPIRES ON 30-Nov-2022</b>	
MODEL YEAR <b>2010</b>	MAKE <b>DODG</b>	MODEL <b>GRAND CARAVAN</b>	MODEL NUMBER	BODY STYLE <b>VAN</b>	COLOR <b>SILVER</b>	VEHICLE IDENTIFICATION NUMBER <b>2D4RN3D12AR489881</b>			
RESIDENTIAL ADDRESS (IF DIFFERENT THAN MAILING)						TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER			
GARAGE ADDRESS <b>241 HAYDENVILLE RD LEEDS MA 01053-9768</b>						US DOT NUMBER FOR COMMERCIAL VEHICLE			
NAME(S) OF OWNER(S) AND MAILING ADDRESS <b>JEFFREY D MILLER 241 HAYDENVILLE RD LEEDS MA 01053-9768</b>						INSURANCE COMPANY <b>ARBELLA PROTECTION INSURANCE COMPANY</b>			
LESSEE/IN CUSTODY OF						MAXIMUM SEATING CAPACITY FOR VEHICLES FOR HIRE			
						<i>Colleen J. Ogilvie</i> Registrar of Motor Vehicles			
SPECIAL MESSAGE  If this vehicle is newly acquired, it must be inspected within 7 days of registration.					CHANGE OF ADDRESS <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> MAILING <input type="checkbox"/> GARAGE				

### Important information for vehicle owners

- **Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. The records of the RMV constitute the official status of the vehicle registration.
- **Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit [mass.gov/rmv](http://mass.gov/rmv) to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- **No Insurance Card Required:** Massachusetts law does not require an insurance card. M.G.L. Chapter 90, Section 34, and Chapter 175, Section 113A, requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. The insurer is required by law to electronically notify the Registry of Motor Vehicles if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.
- **Transferring Your Plates:** Massachusetts General Law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. See the Transferring a Registration Section on the RMV's website at [mass.gov/rmv](http://mass.gov/rmv) for more information.
- **Cancel the registration plates if:**
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

Skip the Line, Go Online! Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) for list of available transactions.













**COSMIC CAB** (413) 230-6119



Massachusetts  
**629 D**  
TAXI

**04**





## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241 Haydenville Rd

Leeds

MA

01053

Number

Street

City/Town

State

Zip Code

Business Address

160 Main St. #8

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Mailing Address

160 Main St. #08

Northampton

MA

01060

Number

Street

City/Town

State

Zip Code

Telephone Number

413-230-6119

## Vehicle Information

Make

Dodge

Registration Number

TA 26983

Model

Grand Caravan

Vehicle Id Number

#12

Year

2010

Seating Capacity

6

(exclusive of operator)

Color

White

Number of Seat belts

7

Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this

29th

day of

April

20

20

before me.

City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council





# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 section 24B makes it a crime to alter this Certificate

MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

Plate Type TAN	Registration Type TAXI NORMAL	Plate Number 26983	Effective Date 01-Dec-2021	Title Number CB980819	Expires On →	Month 11	Year 22
Model Year 2010	Make DODG	Model CARAVA	Model Number	Body Style VAN	Color(s) WHITE	Vehicle Identification Number 2D4RN3D19AR384867	
Residential Address (If Different than Mailing)					Total Registered Weight for Commercial Vehicle or Trailer		
Garage Address 160 MAIN ST STE 8 NORTHAMPTON MA 010603187					US DOT Number for Commercial Vehicle		
Name(s) of Owner(s) and Mailing Address  006901 *****AUTO**5-DIGIT 01060 JEFFREY D MILLER 160 MAIN ST STE 8 NORTHAMPTON MA 01060-3187					Insurance Company ARBELLA PROTECTION INSURANCE COMPANY		
					Maximum Seating Capacity for Vehicles for Hire 7		
					Registrar of Motor Vehicles <i>Colleen J. Ogline</i>		
Lessee/In Custody Of							
Special Message				Change of Address <input type="checkbox"/> Residential <input type="checkbox"/> Mailing <input type="checkbox"/> Garage			

## Important Information for Vehicle Owners

- Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. **The records of the RMV constitute the official status of the vehicle registration.**
- Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- No Insurance Card Required:** Massachusetts law does not require an insurance card. M.G.L. Chapter 90, section 34, and Chapter 175, Section 113A, requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. The insurer is required by law to electronically notify the Registry of Motor Vehicles if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.
- Transferring Your Plates:** Massachusetts General Law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. See the Transferring a Registration Section on the RMV's website at [www.mass.gov/rmv](http://www.mass.gov/rmv) for more information.
- Cancel the registration plates if:**
  - The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle.
  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.



Skip the Line, Go Online! Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) for list of available transactions.

221874491





# Vehicle Inspection Report

Cleaner Air • Safer Roads

## Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 1-844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday, Wednesday, Friday, and Saturday, and from 7 a.m. to 8 p.m. on Tuesday and Thursday.

Overall Result: <b>PASS</b>		Vehicle Information		Station Information	
Safety Result	PASS	VIN	2D4RN3D19AR384867	ERNIE'S GARAGE INC	
Emissions Result	PASS	License Plate	11GF	72 KING STREET	
Start Test Date/Time	12/7/2020 10:53 AM	Plate Type/State	TAN / MA	NORTHAMPTON	MA
End Test Date/Time	12/7/2020 10:57 AM	Vehicle Type	TRUCK	(413) 584-0716	
Test Type	Regular	Year / Make	2010 Dodge		
Sticker Number	215083899	Model	Grand Caravan	Station Number	PB100149
Inspection Type	Initial	Fuel Type	GASOLINE	Workstation Number	MAW00000648
Inspection Counter	1	Engine Cyl / Size	6 / 4L	Inspector Number	*****0933
		GVWR	7000		
		Odometer	165802		
				<b>Inspection Fee</b>	<b>\$35.00</b>

## Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

## Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	92
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	4
RPM Result	PASS	Evaporative System	READY	Pin 16 Voltage	14.6
Key-On Bulb Check	N/A	Secondary Air System	UNSUPPORTED	<b>OBD Diagnostic Trouble Codes</b>	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED		
Scan Tool Check	N/A	Oxygen Sensor	READY	<b>OBD Permanent Fault Codes</b>	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS				

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VIR Number











COTTON  
GALLERY

BEKAN BRIDGE

TAXI

**COSMIC CAB**

160 MAIN ST.  
NORTHAMPTON, MA

**12**



**COSMIC CAB** (413) 230-6119



COLONIAL  
DODGE

DODGE CHALLENGER  
12





## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

 241 Haydensville Rd. Leeds MA 01053  
Number Street City/Town State Zip Code

Business Address

 160 Main St. #8 Northampton MA 01060  
Number Street City/Town State Zip Code

Mailing Address

 160 Main St. #8 Northampton MA 01060  
Number Street City/Town State Zip Code

Telephone Number

413-230-6119

## Vehicle Information

Make

Chrysler

Registration Number

TA 19BR

Model

Town and Country

Vehicle Id Number

#17

Year

2013

Seating Capacity  
(exclusive of operator)

6

Color

Blue

Number of Seat belts

7

 Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo  
 of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

 Sworn to this 29<sup>th</sup> day of April, 2022, before me.

Pamela P. Powers

City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

 is \_\_\_\_\_  
 is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council





## CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate  
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

EXTERNAL CODE <b>TAN</b>		REGISTRATION TYPE <b>Taxi Normal</b>		PLATE NUMBER <b>19BR</b>		EFFECTIVE DATE <b>25-Mar-2022</b>		TITLE NUMBER <b>EXPIRES ON 30-Nov-2022</b>	
MODEL YEAR <b>2013</b>	MAKE <b>CHRY</b>	MODEL <b>TOWN &amp; COUNTRY</b>	MODEL NUMBER	BODY STYLE <b>VAN</b>	COLOR <b>BLUE</b>	VEHICLE IDENTIFICATION NUMBER <b>2C4RC1BG8DR632044</b>			
RESIDENTIAL ADDRESS (IF DIFFERENT THAN MAILING)						TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER			
GARAGE ADDRESS <b>241 HAYDENVILLE RD LEEDS MA 01053-9768</b>						US DOT NUMBER FOR COMMERCIAL VEHICLE			
NAME(S) OF OWNER(S) AND MAILING ADDRESS <b>JEFFREY D MILLER 241 HAYDENVILLE RD LEEDS MA 01053-9768</b>						INSURANCE COMPANY <b>ARBELLA PROTECTION INSURANCE COMPANY</b>			
						MAXIMUM SEATING CAPACITY FOR VEHICLES FOR HIRE			
LESSEE/IN CUSTODY OF						<i>Colleen J. Ogilvie</i> Registrar of Motor Vehicles			
SPECIAL MESSAGE  If this vehicle is newly acquired, it must be inspected within 7 days of registration.						CHANGE OF ADDRESS			
						<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> MAILING <input type="checkbox"/> GARAGE			

### Important information for vehicle owners

- **Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. The records of the RMV constitute the official status of the vehicle registration.
- **Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit [mass.gov/rmv](http://mass.gov/rmv) to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
- **No Insurance Card Required:** Massachusetts law does not require an insurance card. M.G.L. Chapter 90, Section 34, and Chapter 175, Section 113A, requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. The insurer is required by law to electronically notify the Registry of Motor Vehicles if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.
- **Transferring Your Plates:** Massachusetts General Law (M.G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. See the Transferring a Registration Section on the RMV's website at [mass.gov/rmv](http://mass.gov/rmv) for more information.
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  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

Skip the Line, Go Online! Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) for list of available transactions.



# Vehicle Inspection Report

## Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

Questions? Visit [www.mass.gov/vehiclecheck](http://www.mass.gov/vehiclecheck) or call Customer Service at 844-358-0135. Customer Service is staffed from 7 a.m. to 5 p.m. Monday through Friday and from 7 a.m. to Noon on Saturday.

Overall Result:	PASS	Vehicle Information		Station Information
Safety Result	PASS	VIN	2C4RC1BG8DR632044	ERNIE'S GARAGE INC
Emissions Result	PASS	License Plate	19BR	72 KING STREET
Start Test Date/Time	4/22/2022 12:11 PM	Plate Type/State	TAN / MA	NORTHAMPTON MA
End Test Date/Time	4/22/2022 12:17 PM	Vehicle Type	PASSENGER	(413) 584-0716
Test Type	Regular	Year / Make	2013 Chrysler	
Sticker Number	231418858	Model	Town and Country	Station Number PB100149
Inspection Type	Initial	Fuel Type	FLEXIBLE	Workstation Number MAW00000648
Inspection Counter	1	Engine Cyl / Size	6 / 3.6L	Inspector Number *****1632
		GVWR	7000	
		Odometer	167855	

Inspection Fee	\$35.00
----------------	---------

## Safety Inspection Results

License Plate Mounting and Condition	PASS	Service Brakes	PASS	Parking Brake	PASS
Horn	PASS	Stop Lights and Tail Lights	PASS	Headlight Aim and Operation	PASS
Lighting Devices and Reflectors	PASS	Directional Signals and 4-Ways	PASS	Front End	PASS
Steering and Suspension	PASS	Frame	PASS	Windshield Wipers and Cleaner	PASS
Safety Belts	PASS	Air Bags	PASS	Muffler and Exhaust System	PASS
Window Tint	PASS	Windshield	PASS	Rear View Mirror	PASS
Bumpers/Fenders/Exterior Sheet Metal	PASS	Fuel Tank Filler Cap	PASS	Fuel Tank Filler Neck and Components	PASS
Visible Smoke	PASS	Altered Vehicle Height	PASS	Tires	PASS
Other	PASS				

## Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	437
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	18
RPM Result	PASS	Evaporative System	READY	Pin 16 Voltage	14.3
Key-On BulbCheck	N/A	Secondary Air System	UNSUPPORTED	OBD Diagnostic Trouble Codes	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED		
Scan Tool Check	N/A	Oxygen Sensor	READY	OBD Permanent Fault Codes	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS				

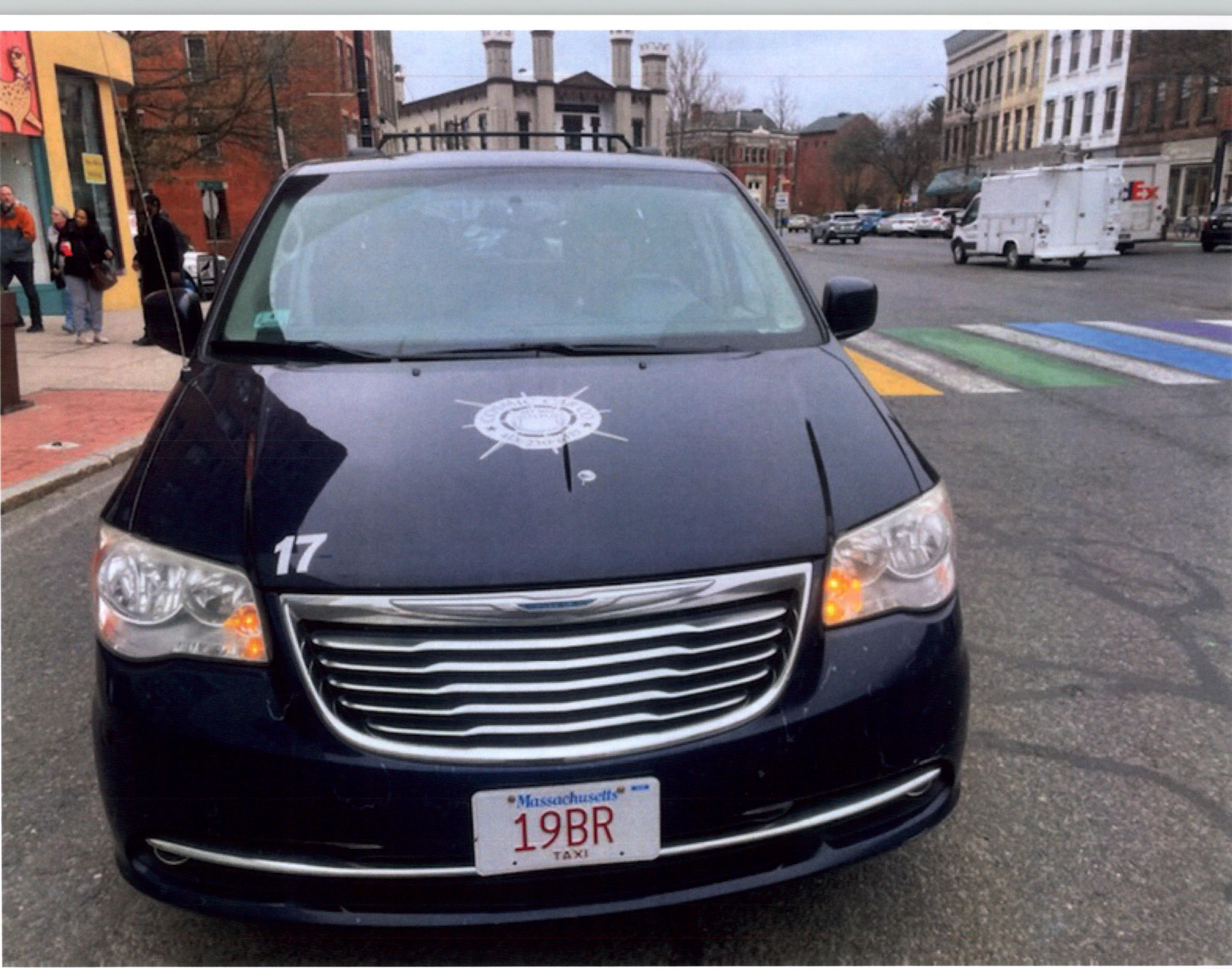
VIR Number



Scan to visit website:











**COSMIC CAB**  
-----  
160 MAIN ST.  
NORTHAMPTON, MA

17





Massachusetts 22  
**19BR**  
TAXI

17

**COSMIC CAB**





## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241 Haydensville Rd. Leeds MA 01053

Business Address

160 Main St. #8 Northampton MA 01060

Mailing Address

160 Main St. #8 Northampton MA 01060

Telephone Number

413-230-6119

## Vehicle Information

Make

Chrysler

Registration Number

TA 16 F13

Model

Town + Country

Vehicle Id Number

#16

Year

2014

Seating Capacity

6

Color

Gray

Number of Seat belts

7

Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this

29<sup>th</sup>

day of

April

20

22

before me.

*[Signature]*  
City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council





# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate  
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

EXTERNAL CODE <b>TAN</b>		REGISTRATION TYPE <b>Taxi Normal</b>		PLATE NUMBER <b>16FB</b>		EFFECTIVE DATE <b>08-Mar-2022</b>		TITLE NUMBER <b>EXPIRES ON 30-Nov-2022</b>	
MODEL YEAR <b>2014</b>	MAKE <b>CHRY</b>	MODEL <b>TOWN &amp; COUNTRY</b>	MODEL NUMBER	BODY STYLE <b>VAN</b>	COLOR <b>GRAY</b>	VEHICLE IDENTIFICATION NUMBER <b>2C4RC1BG2ER127036</b>			
RESIDENTIAL ADDRESS (IF DIFFERENT THAN MAILING)						TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER			
GARAGE ADDRESS <b>241 HAYDENVILLE RD LEEDS MA 01053-9768</b>						US DOT NUMBER FOR COMMERCIAL VEHICLE			
NAME(S) OF OWNER(S) AND MAILING ADDRESS <b>JEFFREY D MILLER 241 HAYDENVILLE RD LEEDS MA 01053-9768</b>						INSURANCE COMPANY <b>ARBELLA PROTECTION INSURANCE COMPANY</b>			
LESSEE/IN CUSTODY OF						MAXIMUM SEATING CAPACITY FOR VEHICLES FOR HIRE			
						<i>Colleen J. O'Brien</i> Registrar of Motor Vehicles			
SPECIAL MESSAGE <b>If this vehicle is newly acquired, it must be inspected within 7 days of registration.</b>						CHANGE OF ADDRESS <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> MAILING <input type="checkbox"/> GARAGE			

## Important information for vehicle owners

- **Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. The records of the RMV constitute the official status of the vehicle registration.
- **Change of Address:** By law, you must report any change of address to the RMV within 30 days. Visit [mass.gov/rmv](http://mass.gov/rmv) to change your address. Once you have reported the address change to the RMV, please write corrected address in box provided above.
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- **Cancel the registration plates if:**
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  - You move to another state and you register the vehicle in that state.
  - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

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# Vehicle Inspection Report

## Please Review This Important Information

Your vehicle has **PASSED** both its **SAFETY TEST** and its **EMISSIONS TEST**. The results are summarized in this report.

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Overall Result: <b>PASS</b>		Vehicle Information		Station Information	
Safety Result	N/A	VIN	2C4RC1BG2ER127036	ERNIE'S GARAGE INC	
Emissions Result	PASS	License Plate	16FB	72 KING STREET	
Start Test Date/Time	4/29/2022 11:55 AM	Plate Type/State	TAN / MA	NORTHAMPTON MA	
End Test Date/Time	4/29/2022 12:01 PM	Vehicle Type	PASSENGER	(413) 584-0716	
Test Type	Regular	Year / Make	2014 Chrysler		
Sticker Number	231418982	Model	Town and Country	Station Number	PB100149
Inspection Type	Retest	Fuel Type	FLEXIBLE	Workstation Number	MAW00000648
Inspection Counter	2	Engine Cyl / Size	6 / 3.6L	Inspector Number	*****5128
		GVWR	7000		
		Odometer	178273		

<b>Inspection Fee</b>	<b>\$0.00</b>
-----------------------	---------------

## Safety Inspection Results

## Inspection Comments

None

On-Board Diagnostic (OBD) Results		OBD Readiness Monitor Results		OBD Additional Data	
Tampering Check	PASS	Catalyst	READY	Miles Since Code Clearing	35
Connector Result	PASS	Catalyst Heater	UNSUPPORTED	Warm-Ups Since Code Clearing	4
RPM Result	PASS	Evaporative System	NOT READY	Pin 16 Voltage	14.3
Key-On Bulb Check	N/A	Secondary Air System	UNSUPPORTED	<b>OBD Diagnostic Trouble Codes</b>	
Engine-Running Bulb Check	N/A	A/C System	UNSUPPORTED		
Scan Tool Check	N/A	Oxygen Sensor	READY	<b>OBD Permanent Fault Codes</b>	
Communication Result	PASS	Oxygen Sensor Heater	READY		
MIL Status Result	PASS	EGR and/or VVT System	READY		
Readiness Result	PASS			P0420	

VIR Number



Scan to visit website:







**COSMIC CAB**  
160 MAIN ST.  
NORTHAMPTON, MA

**16**









TOWN & COUNTRY



16

COSMIC CAB





## City of Northampton

## Application for Vehicle Registration - Vehicle for Hire

PRINT ALL INFORMATION (except signature)

(Check one)



Taxi Vehicle



Livery Vehicle

Today's Date:

4/29/22

Name (First, Middle, Last)

Jeffrey David Miller

Residential Address

241 Haydenville Rd. Leeds MA 01053

Business Address

160 Main St. #8 Northampton MA 01060

Mailing Address

160 Main St. #8 Northampton MA 01060

Telephone Number

413-230-6119

## Vehicle Information

Make

Dodge

Registration Number

TA 27569

Model

Grand Caravan

Vehicle Id Number

#07

Year

2010

Seating Capacity  
(exclusive of operator)

6

Color

Gray

Number of Seat belts

7

Attach the following: Insurance Policy for this vehicle; child safety seat plan; copy of vehicle inspection; color photo  
of vehicle

Liability Limits: \$100,000 / \$300,000 injury or death; \$50,000 property damage

Policy must show that the policy shall not be cancelled without giving the City clerk 10 days notice thereof.

Sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me.

City Clerk

## FOR LICENSING AUTHORITY USE

In City Council, \_\_\_\_\_, voted that this petition

is

is not \_\_\_\_\_ granted.

Attest:

Clerk to the City Council





# CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 section 24B makes it a crime to alter this Certificate

MASSACHUSETTS DEPARTMENT OF TRANSPORTATION

Plate Type TAN	Registration Type TAXI NORMAL	Plate Number 27569	Effective Date 01-Dec-2021	Title Number CC469045	Expires On →	Month 11	Year 22
Model Year 2010	Make DODG	Model CARAVA	Model Number	Body Style VAN	Color(s) GRAY	Vehicle Identification Number 2D4RN4DE8AR207297	
Residential Address (If Different than Mailing)					Total Registered Weight for Commercial Vehicle or Trailer		
Garage Address 24B HAYDENVILLE RD LEEDS MA 010539713					US DOT Number for Commercial Vehicle		
Name(s) of Owner(s) and Mailing Address  006904 *****AUTO**5-DIGIT 01060 JEFFREY D MILLER 160 MAIN ST STE 8 NORTHAMPTON MA 01060-3187					Insurance Company ARBELLA PROTECTION INSURANCE COMPANY		
					Maximum Seating Capacity for Vehicles for Hire 7		
					Registrar of Motor Vehicles <i>Colleen J. Ogilvie</i>		
Lessee/In Custody Of							
Special Message			Change of Address <input type="checkbox"/> Residential <input type="checkbox"/> Mailing <input type="checkbox"/> Garage				

## Important Information for Vehicle Owners

- Certificate of Registration:** Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and/or trailer, in the vehicle, in some easily accessible place. **The records of the RMV constitute the official status of the vehicle registration.**
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Skip the Line, Go Online! Visit [Mass.Gov/RMV](http://Mass.Gov/RMV) for list of available transactions.

221874494



People's United  
Bank

ONE WAY  
DO NOT  
ENTER

07

**COSMIC CAB**  
160 MAIN ST.  
NORTHAMPTON, MA







**COSMIC CAB** (413) 230-6119



Massachusetts 22  
**27569**  
TAXI

**DODGE**  
FLEXFUEL  
E85 ETHANOL

**RAM**  
**CARAVAN**  
SE  
**07**